



Vermont Certified Horticulturist Application

To receive your certificate and become an official Vermont Certified Horticulturist, please submit a completed application with all attachments, a signed code of ethics, and \$35.00 (\$50.00 for non-members) payable to VNLA at the above address.

Eligibility Requirements

Two (2) letters of recommendation from Green Works/VNLA members. (Please attach to application).

Six (6) years of *full-time nursery, greenhouse, garden center, landscape or related employment or three (3) years of *full-time employment and two (2) years minimum of post-secondary related school education, or one (1) year of *full-time nursery employment and a bachelor's degree in a horticulture related field. Please provide letters of reference to verify all employment necessary to meet the requirements. If you are using education to meet requirements, please provide the following:

School(s) _____ Number of years _____

***Full-time is defined as a full growing season, spring to fall.**

Mailing Address:

Name: _____

Address: _____ City _____ State _____ Zip _____

Phone: (day) _____ (evening) _____ E-mail: _____

Preferred business address for publications and website:

Green Works/VNLA will continue to promote Vermont Certified Horticulturists through the Association's Annual Report and marketing brochures distributed at the Flower Show and through member businesses. Please note that we will continue to publish your listed address unless otherwise notified.

Company: _____ Name: _____

Address: _____ City _____ State _____ Zip _____

Phone: _____ E-mail: _____ Website _____

Please list my: Company Address Home address in the VCH Brochure & Green Works/VNLA Website **(check one)**

Please list my: Email Address and Website address in the VCH Brochure & Green Works/VNLA Website

May we contact you by email regarding VNLA/horticulture related news and events **(circle one)** YES NO

I certify that the information contained in this application is true. I understand that falsification of information in this application is grounds for revocation of certification.

Signature _____ Date _____

PO Box 92, North Ferrisburgh, Vermont 05473

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